Image# 10931277957 FEC FORM 2 STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full)							
Martha Roby							
(b) Address (number and street)	eet)				2. Identification Number		
3260 Bankhead Avenue					H0AL020	87	
(c) City, State and ZIP Code	A. I.		00100		3. Is This Statemer	nt X New	
Montgomery 4. Party Affiliation	AL 5. Office Sought		36106	State & Dist	I trict of Candid	(14)	OR (A)
REPUBLICAN PARTY	House			AL 02	inot or oanaic	acio	
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE							
7. I hereby designate the following name	d political committee	as my Principa	al Campaiç	gn Committee		year of election	election(s). n)
NOTE:This designation should be	filed with the appro	opriate office I	listed in th	e instructions	3.		
(a) Name of Committee (in full)							
Martha Roby for Congress							
(b) Address (number and street)							
PO Box 195							
(c) City, State and ZIP Code							
Montgomery	AL		361	01			
(Including Joint Fundraising Representatives) 8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee.							
(a) Name of Committee (in full)							
Young Guns Joint Fundraising	Committee I						
(b) Address (number and street)							
4703 Woodway Ln NW							
(c) City, State and ZIP Code							
Washington	DC		200	16			
I certify that I have exa	amined this Statem	ent and to the	best of m	ny knowledge	and belief it is	s true, correc	et, and complete.
Signature of Candidate					Date		
Martha Roby					09/16/2010		
NOTE: Submission of false, erroneou	us or incomplete in	ormation may	subject t	he person sig	ning this Stat	ement to pen	alties of 2 U.S.C.§437g.
			·				

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DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ADDITIONAL]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Founders Joint Candidate Committee

(b) Address (number and street) 228 S Washington St, Ste 115

(c) City, State and ZIP Code

Alexandria 22314

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ADDITIONAL]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Young Guns Victory Fund II

(b) Address (number and street)

25 E Main St

(c) City, State and ZIP Code

Richmond 23219